Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Child Sling OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY OR SMALL ENTITY (Column 2) (Column I) FOR NUMBER FILED **NUMBER EXTRA** RATE RATE FEE BASIC FEE 385 *?85* OR \$ (37 CFR 1.16(a)) TOTAL CLAIMS 20 minus 20 = 0 OR 0 (37 CFR 1.16(c)) INDEPENDENT CLAIMS minus 3 = 1 OR = (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) 0 O OR 8 \* If the difference in column 1 is less then zero, enter "0" in column 2 TOTAL OR TOTAL OTHER THAN CLAIMS AS AMENDED - PART II SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING PRESENT NUMBER RATE TIONAL TIONAL **RATE** AFTER PREVIOUSLY **EXTRA** AMENDMEN FEE FEE AMENDMENT PAID FOR Total OR Minus (37 CFR 1.16(c)) OR Independent \*\*\* Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR (Column 1) ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** RATE TIONAL TIONAL RATE AMENDMENT **AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR. Total Minus = x \$\_ (37 CFR 1.16(c)) \$ OR \*\*\* Independent Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL AMENDMENT AFTER PREVIOUSLY **EXTRA** FEE FEE AMENDMENT PAID FOR OR Total (37 CFR 1.16(c)) Minus x S OR Independent \*\*\* Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL OR TOTAL \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.

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Patents, Washington, DC 20231.

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 **CLAIMS AS FILED - PART I** SMALL ENTITY **OTHER THAN** TYPE [ **SMALL ENTITY** OR (Column 1) (Column 2) **TOTAL CLAIMS** RATE FEE RATE FEE 7 i BASIC FEE BASIC FEE 770.00 385.00 NUMBER EXTRA NUMBER FILED OR **FOR** TOTAL CHARGEABLE CLAIMS X\$18=minus 20= X\$ 9= OR a INDEPENDENT CLAIMS minus 3 =X86= X43 =43 OR MULTIPLE DEPENDENT CLAIM PRESENT +290= +145= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL 437 TOTAL OR OTHER THAN **CLAIMS AS AMENDED - PART II** SMALL ENTITY SMALL ENTITY OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-NUMBER **PRESENT** 4 REMAINING TIONAL TIONAL RATE RATE **PREVIOUSLY EXTRA AFTER** AMENDMENT FEE FEE PAID FOR **AMENDMENT** X\$18= Minus X\$ 9= Total OR Independent Minus X86= X43= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145= OR 1,15,18,20 TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER **PRESENT**  $\mathbf{\omega}$ **TIONAL** TIONAL RATE RATE **PREVIOUSLY EXTRA** AMENDMENT **AFTER FEE** FEE AMENDMENT PAID FOR Total Minus X\$ 9= X\$18= OR Independent Minus X86= X43 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145= OR TOTAL TOTAL OR ADDIT, FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-ပ REMAINING NUMBER **PRESENT** RATE TIONAL TIONAL RATE **PREVIOUSLY** AMENDMENT **AFTER EXTRA** FEE **AMENDMENT** PAID FOR FEE Minus **Total** X\$18= X\$ 9= OR Minus Independent X86= X43 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145= OR \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE \*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.